

**ENGINEERING DEPARTMENT**

6101 SE Johnson Creek Blvd
Milwaukie OR 97206

PHONE: 503-786-7606

FAX: 503-774-8236

E-MAIL: engineering@milwaukieoregon.gov

FILOC Request Application

FEE ITEM*:

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Downtown Public Area Requirements	Transportation	Water	Stormwater	Wastewater	Water Quality

The City of Milwaukie allows developers to request a Fee In Lieu of Construction (FILOC) for required improvements under certain circumstances. Details can be found at: www.milwaukieoregon.gov/engineering.

*The FILOC fee amount will be based on Section 6 of the Master Fee Schedule, found at:
www.milwaukieoregon.gov/finance/fees-charges.

PROJECT INFORMATION:

Site Address/Location:

Project Name:

Map & Tax Lot(s):

FILOC Requested: \$

Land Use File # (if applicable):

Est. Construction Start Date:

Completion Date:

Description of work and justification for request (including detailed fee item breakdown):

RESPONSIBLE PARTIES:**PROPERTY OWNER:**

Mailing address:

Zip:

Phone(s):

E-mail:

APPLICANT: ☐ Contractor ☐ Representative ☐ Other:

Business Name:

Mailing address:

Zip:

Phone(s):

E-mail:

IMPORTANT INFORMATION ON REVERSE SIDE

FILOC ELIGIBILITY:

The City may accept a fee-in-lieu-of-construction of required facility improvements if one or more of the following conditions exist:

1. Required improvements are not feasible due to the inability to achieve proper design standards.
2. Required improvements would create a safety hazard.
3. Required improvements are part of a larger approved capital improvement project that is listed as a funded project in the City's Capital Improvement Plan (CIP).
4. Required improvements would create a situation that would not comply with City standards without extensive additional offsite improvements.
5. Required improvements are less than needed to meet City standards due to the City's inability to require full improvements based on proportionality requirements on the development.

Certification of Applicant

The applicant certified that all information in this application and all information furnished in support of this application is given for the purpose of enrollment into the FILOC program and is true and complete to the best of the applicant's knowledge and belief.

If the applicant is not the owner of the property to be rehabilitated, or if the applicant is an organization rather than an individual, the applicant certified that he/she has the authority to sign and enter into an agreement to perform the work on the property. Evidence of this authority is attached.

Applicant Name/Business

Applicant Signature

____/____/____
Date

THIS SECTION FOR OFFICE USE ONLY**Date Received:****FILOC Requested**

\$

Approved By:**FILOC Approved**

\$

Date Approved:**Notes:**